

Project No: 3455/2006

“To study the effect of depression on coronary artery disease (CAD)”

Principal Worker

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Unit

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Objectives

The primary aim is to study the prevalence of depression and anxiety symptoms among newly diagnosed cases of coronary artery disease in uniformed personnel. The secondary aim is to assess the impact of coronary artery disease on the subjective quality of life in patients of coronary artery disease. Also it aims to study the effect of anti-depressant medication among depressed cases of coronary artery disease and assess changes with time in depressive symptomatology, anxiety symptoms.

Method

A total of 119 fresh cases of CAD among serving/retired male armed forces personnel were recruited into the study between Aug 2006 and June 2008. All serving and ex-service men patients reporting to a tertiary care hospital within 04 weeks of being diagnosed as having coronary artery disease were recruited for the study. The study group received a detailed interview covering socio-demographic information, previous psychiatric and medical history; recent symptoms and case documents were examined to assess the cardiovascular status. They were administered the Beck's Depression inventory, Hospital anxiety and depression scale and the WHO Quality of Life-Brief scale. Depressed patients were offered an SSRI anti depressant (Citalopram) in the dose of 20mg/day or placebo randomly and asked to report for follow up every 1&3 months at the time of review at the OPD and were administered the above scales. Non depressed patients were asked to report for review every 3 months at the OPD and administered the above scales.

Results

The prevalence of depression was found to be 13 cases (11%) of CAD patients and 15% among MI cases and prevalence of anxiety was 15%. There was 70-75% reduction in depressive/anxiety symptoms at 3 months and 85-90% at 6 months among the depressed patients treated with antidepressant.

Recommendations

All new patients should be screened and those having anxiety or depression should be examined by a psychiatrist. Moderate to severe depressed patients with CAD should be treated with SSRI (citalopram) and patients should be educated about nature of illness, prognosis, impact on lifestyle, lifestyle modification.